

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

RECEIVED
CENTRAL FAX CENTER

NOV 21 2005

FACSIMILE COVER SHEET

Deliver to: Donghai D. Nguyen, USPTO Art Group: 3729
 Facsimile No.: 571 273-4566 Date: November 21, 2005
 From: William W. Schaal, Reg. No. 39,018
 Our Docket No.: 42P6139CD Number of pages 13 including this sheet.
 Application No.: 10/657,415 Filing Date: 9/8/2003
 Docket Due Date(s): 12/28/2005

Enclosed are the following documents:

| | |
|---|---|
| <input checked="" type="checkbox"/> Amendment: <u>After Final</u> (<u>9</u> pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (<u> </u> pgs) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: <u> </u> | <input type="checkbox"/> Petition for: <u> </u> |
| (<u> </u> pgs) w/cover & abstract) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs) | <input type="checkbox"/> Reply Brief (<u> </u> pgs) |
| <input checked="" type="checkbox"/> Certificate of Facsimile | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Declaration & POA (<u> </u> pgs) | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Drawings: <u> </u> sheets, <u> </u> figures | <input type="checkbox"/> Response to Written Opinion (<u> </u> pgs) |
| <input type="checkbox"/> Extension of Time: <u> </u> | <input type="checkbox"/> Terminal Disclaimer |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs) | <input checked="" type="checkbox"/> Transmittal Letter |
| <input type="checkbox"/> Other <u> </u> | |

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Susan McFarlane 11/21/2005
 Susan McFarlane Date

Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

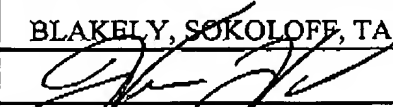
If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Susan McFarlane.

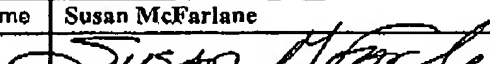
RECEIVED
CENTRAL FAX CENTER

NOV 21 2005

| | | | |
|---|----|------------------------|-------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application No. | 10/657,415 |
| | | Filing Date | September 8, 2003 |
| | | First Named Inventor | Carapella, et al. |
| | | Art Unit | 3729 |
| | | Examiner Name | Donghai D. Nguyen |
| Total Number of Pages in This Submission | 12 | Attorney Docket Number | 42P6139CD |

| ENCLOSURES (check all that apply) | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature |  |
| Date | November 24, 2005 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
|--|---|------|-------------------|
| I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office. | | | |
| Typed or printed name | Susan McFarlane | | |
| Signature |  | Date | November 21, 2005 |

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 01/04/2004
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED
CENTRAL FAX CENTER

NOV 21 2005

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | 10/657,415 |
| Filing Date | September 8, 2003 |
| First Named Inventor | Carapella, et al. |
| Examiner Name | Donghai D. Nguyen |
| Art Unit | 3729 |
| Attorney Docket No. | 42P6139CD |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 24 | 0 | 50.00 | \$0.00 |
| Independent Claims | | | |
| 3 | 0 | 200.00 | \$0.00 |
| Multiple Dependent | | | |

| Large Entity | Small Entity | Fee Description |
|---------------|---------------|---|
| Fee Code (\$) | Fee Code (\$) | |
| 1202 50 | 2202 25 | Claims in excess of 20 |
| 1201 200 | 2201 100 | Independent claims in excess of 3 |
| 1203 380 | 2203 180 | Multiple Dependent claim, if not paid |
| 1204 300 | 2204 150 | **Reissue independent claims over original patent |
| 1205 300 | 2205 150 | **Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (1) | | (\$) |

0.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description |
|---------------------|---------------|--|
| Fee Code (\$) | Fee Code (\$) | |
| 1051 130 | 2051 65 | Surcharge - late filing fee or oath |
| 1052 60 | 2052 25 | Surcharge - late provisional filing fee or cover sheet |
| 2053 130 | 2053 130 | Non-English specification |
| 1251 120 | 2251 60 | Extension for reply within first month |
| 1252 450 | 2252 225 | Extension for reply within second month |
| 1253 1,020 | 2253 510 | Extension for reply within third month |
| 1254 1,580 | 2254 790 | Extension for reply within fourth month |
| 1255 2,180 | 2255 1,080 | Extension for reply within fifth month |
| 1401 500 | 2401 250 | Notice of Appeal |
| 1402 500 | 2402 250 | Filing a brief in support of an appeal |
| 1403 1,000 | 2403 500 | Request for oral hearing |
| 1451 1,510 | 2451 1,510 | Petition to institute a public use proceeding |
| 1400 130 | 2400 130 | Petitions to the Commissioner |
| 1807 80 | 1807 50 | Processing fee under 37 CFR 1.17(a) |
| 1808 180 | 1808 180 | Submission of Information Disclosure Stmt |
| 1809 790 | 1809 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) |
| 1810 790 | 2810 395 | For each additional invention to be examined (37 CFR § 1.129(b)) |
| Other fee (specify) | | |
| SUBTOTAL (2) | | (\$) |

Fee Paid

(\$)

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|---|--------------------------------------|----------|-----------|----------------|
| Name (Print/Type) | William W. Schaal | Registration No. (Attorney/Agent) | 39,018 | Telephone | (714) 557-3800 |
| Signature |  | Date | 11/21/05 | | |

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (M/R) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

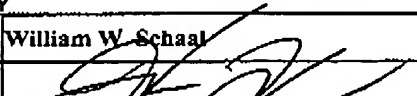
RECEIVED
CENTRAL FAX CENTER

NOV 21 2005

| | | | | |
|--|--|----------------------|---------------------|-------------------|
| FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small> | | Complete if Known | | |
| | | Application Number | 10/657,415 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | Filing Date | September 8, 2003 | |
| | | First Named Inventor | Carapella, et al. | |
| TOTAL AMOUNT OF PAYMENT (\$) | | 0.00 | Examiner Name | Donghai D. Nguyen |
| | | | Art Unit | 3729 |
| | | | Attorney Docket No. | 42P6139CD |

| | |
|---|--|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u> | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments | |

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------|--------------|----------|----------|----------|---------|---------|---------|--------------------|----------|----------|---------|----------|----------|------------|----------|--------------------|----------|------------|------------|----------|----------|----------|----------|--|--------------|--------------|------------|----------|----------|---------|----------|----------|----------|----------|----------|----------|----------|--|-----------------|----------|-------------------------------------|--|--|--|---------------------------|--|--|--|---|--|--|--|---|--|--|--|------------------|--|--|--|--------------------------|--|---|--|-------------------------------|--|-------------------------------------|--|--|--|---|--|--|--|
| FEE CALCULATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. EXTRA CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Total Claims</td> <td>24</td> <td>24*</td> <td>0</td> <td>x</td> <td>50.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>3*</td> <td>0</td> <td>x</td> <td>200.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>=</td> <td></td> </tr> </table> | Total Claims | 24 | 24* | 0 | x | 50.00 | = | \$0.00 | Independent Claims | 3 | 3* | 0 | x | 200.00 | = | \$0.00 | Multiple Dependent | | | | | | = | | <table border="1"> <tr> <td>Large Entity</td> <td>Small Entity</td> </tr> <tr> <td>Fee Code</td> <td>Fee Code</td> </tr> <tr> <td>1202 50</td> <td>2202 20</td> </tr> <tr> <td>1201 200</td> <td>2201 100</td> </tr> <tr> <td>1203 360</td> <td>2203 180</td> </tr> <tr> <td>1204 300</td> <td>2204 160</td> </tr> <tr> <td>1205 300</td> <td>2205 160</td> </tr> </table> | Large Entity | Small Entity | Fee Code | Fee Code | 1202 50 | 2202 20 | 1201 200 | 2201 100 | 1203 360 | 2203 180 | 1204 300 | 2204 160 | 1205 300 | 2205 160 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 24 | 24* | 0 | x | 50.00 | = | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | 3 | 3* | 0 | x | 200.00 | = | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent | | | | | | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity | Small Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1202 50 | 2202 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1201 200 | 2201 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1203 360 | 2203 180 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1204 300 | 2204 160 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1205 300 | 2205 160 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description Claims in excess of 20 Independent claims in excess of 3 Multiple Dependent claim, if not paid **Release independent claims over original patent **Release claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) (\$) 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Large Entity</td> <td>Small Entity</td> </tr> <tr> <td>Fee Code</td> <td>Fee Code</td> </tr> <tr> <td>1051 130</td> <td>2051 65</td> </tr> <tr> <td>1052 50</td> <td>2052 25</td> </tr> <tr> <td>2053 130</td> <td>2053 130</td> </tr> <tr> <td>1251 120</td> <td>2251 60</td> </tr> <tr> <td>1252 450</td> <td>2252 225</td> </tr> <tr> <td>1253 1,020</td> <td>2253 510</td> </tr> <tr> <td>1254 1,690</td> <td>2254 795</td> </tr> <tr> <td>1255 2,160</td> <td>2255 1,080</td> </tr> <tr> <td>1401 500</td> <td>2401 250</td> </tr> <tr> <td>1402 500</td> <td>2402 250</td> </tr> <tr> <td>1403 1,000</td> <td>2403 500</td> </tr> <tr> <td>1451 1,610</td> <td>2451 1,510</td> </tr> <tr> <td>1480 130</td> <td>2480 130</td> </tr> <tr> <td>1807 50</td> <td>1807 50</td> </tr> <tr> <td>1808 180</td> <td>1808 180</td> </tr> <tr> <td>1809 790</td> <td>1809 395</td> </tr> <tr> <td>1810 790</td> <td>2810 395</td> </tr> </table> | Large Entity | Small Entity | Fee Code | Fee Code | 1051 130 | 2051 65 | 1052 50 | 2052 25 | 2053 130 | 2053 130 | 1251 120 | 2251 60 | 1252 450 | 2252 225 | 1253 1,020 | 2253 510 | 1254 1,690 | 2254 795 | 1255 2,160 | 2255 1,080 | 1401 500 | 2401 250 | 1402 500 | 2402 250 | 1403 1,000 | 2403 500 | 1451 1,610 | 2451 1,510 | 1480 130 | 2480 130 | 1807 50 | 1807 50 | 1808 180 | 1808 180 | 1809 790 | 1809 395 | 1810 790 | 2810 395 | <table border="1"> <tr> <td>Fee Description</td> <td>Fee Paid</td> </tr> <tr> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>Non-English specification</td> <td></td> </tr> <tr> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>Petition to Institute a public use proceeding</td> <td></td> </tr> <tr> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>Processing fee under 37 CFR 1.17(a)</td> <td></td> </tr> <tr> <td>Submission of Information Disclosure Sheet</td> <td></td> </tr> <tr> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>For each additional invention to be examined (37 CFR § 1.120(b))</td> <td></td> </tr> </table> | Fee Description | Fee Paid | Surcharge - late filing fee or oath | | Surcharge - late provisional filing fee or cover sheet | | Non-English specification | | Extension for reply within first month | | Extension for reply within second month | | Extension for reply within third month | | Extension for reply within fourth month | | Extension for reply within fifth month | | Notice of Appeal | | Filing a brief in support of an appeal | | Request for oral hearing | | Petition to Institute a public use proceeding | | Petitions to the Commissioner | | Processing fee under 37 CFR 1.17(a) | | Submission of Information Disclosure Sheet | | Filing a submission after final rejection (37 CFR § 1.129(a)) | | For each additional invention to be examined (37 CFR § 1.120(b)) | |
| Large Entity | Small Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1051 130 | 2051 65 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1052 50 | 2052 25 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2053 130 | 2053 130 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1251 120 | 2251 60 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1252 450 | 2252 225 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1253 1,020 | 2253 510 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1254 1,690 | 2254 795 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1255 2,160 | 2255 1,080 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1401 500 | 2401 250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1402 500 | 2402 250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1403 1,000 | 2403 500 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1451 1,610 | 2451 1,510 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1480 130 | 2480 130 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1807 50 | 1807 50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1808 180 | 1808 180 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1809 790 | 1809 395 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1810 790 | 2810 395 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge - late filing fee or oath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge - late provisional filing fee or cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Non-English specification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for reply within first month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for reply within second month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for reply within third month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for reply within fourth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for reply within fifth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing a brief in support of an appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Request for oral hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petition to Institute a public use proceeding | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Processing fee under 37 CFR 1.17(a) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Submission of Information Disclosure Sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing a submission after final rejection (37 CFR § 1.129(a)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For each additional invention to be examined (37 CFR § 1.120(b)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|-------------------|---|-----------------------------------|----------------|
| SUBMITTED BY | | Complete (if applicable) | |
| Name (Print/Type) | William W. Schaal | Registration No. (Attorney/Agent) | 39,018 |
| Signature |  | Telephone | (714) 557-3800 |
| | | Date | 11/21/05 |

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (WTR) 12/19/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/657,415
Amdt. Dated 11/21/2005
Reply to Final Office Action of 10/28/2005

RECEIVED
CENTRAL FAX CENTER

NOV 21 2005

**RESPONSE UNDER 37 C.F.R. 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 3729**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/657,415
Applicant : Elissa E. Carapella
Filed : 09/08/2003
TC/A.U. : 3729
Examiner : Donghai D. Nguyen

Confirmation No. 9024

Docket No. : 42P6139CD
Customer No. : 8791

BOX AF
Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT AND RESPONSE UNDER 37 CFR §1.116

Sir:

In response to the Final Office action of October 28, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.